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44955 7590 12/28/2005

**SQUIRE, SANDERS & DEMPSEY L.L.P.
1 MARITIME PLAZA, SUITE 300
SAN FRANCISCO, CA 94111**

03/31/2006 WABDEL3 00000014 071850 09412297

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Rebecca M. Klits (Depositor's name)
Rebecca M. Klits (Signature)
March 28, 2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/412,297	10/05/1999	KANG TING	3100.006US0	9486

TITLE OF INVENTION: NELL-1 ENHANCED BONE MINERALIZATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	03/28/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
FORD, VANESSA L	1645	435-007210

<p>1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</p> <p><input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</p> <p><input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</p>	<p>2. For printing on the patent front page, list</p> <p>(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,</p> <p>(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.</p>	<p>Squire, Sanders & Dempsey L.L.P.</p> <p>2 _____</p> <p>3 _____</p>
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

The Regents of the
University of California

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Oakland, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature _____

Date 3/28/06

Typed or printed name Zhaoyang Li, Ph.D.

Registration No. 46,872

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/412,297	
	Filing Date	October 5, 1999	
	First Named Inventor	Kang Ting	
	Group Art Unit	1645	
	Examiner Name	Vanessa L. ford	
Total Number of Pages in This Submission (excluding references)	3	Attorney Docket Number	39370.00011

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization <input checked="" type="checkbox"/> Postage Paid Return Postcard <input type="checkbox"/> Supplemental Response II (pages) <input type="checkbox"/> Amendment <input type="checkbox"/> Declaration (pages) <input type="checkbox"/> Petition for Extension of Time (month) (in duplicate) <input type="checkbox"/> Information Disclosure Statement (in duplicate) with Form PTO-1449 and References <input checked="" type="checkbox"/> Express Mail Label No. EV 687138117 US <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) In/Formal Sheets with Submission of Drawings Transmittal <input checked="" type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate) <input type="checkbox"/> Request for Continued Examination Transmittal (RCE) <input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) Remarks	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Fee Address Indication Form <input type="checkbox"/> Other Enclosure(s) (please identify below):

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Zhaoyang Li, Ph.D., Reg. No. 46,872
Signature	
Date	March 28, 2006

CERTIFICATE OF MAILING			
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Typed or printed name	Rebecca M. Klits		
Signature		Date	March 28, 2006